



2652 41

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031  
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/062,955
	Filing Date	01/31/2002
	First Named Inventor	Raffi Codilian
	Art Unit	2652
	Examiner Name	Julie Anne Watko
Total Number of Pages in This Submission	Attorney Docket Number	WSTDL-049A / K35A1030

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Certificate of Mailing and Two (2) Return Postcards; Form PTO/SB/08a (in duplicate);
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Check in the amount of \$180 (IDS filing fee); and
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	Check in the amount of \$938 (extra claims/extension of time filing fees).
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Eric L. Tanezaki STETINA BRUNDA GARRED & BRUCKER - Customer No. 007663
Signature	<i>Eric L. Tanezaki</i>
Date	09/01/2004

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Kimberly Carlsen		
Signature		Date	09/01/2004

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 1,118.00

## Complete if Known

Application Number 10/062,955  
Filing Date 01/31/2002  
First Named Inventor Raffi Codilian  
Examiner Name Jule Anne Codilian  
Art Unit 2652  
Attorney Docket No. WSTD L-049A / K35 0939

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number 19-4330  
Deposit Account Name Stetina Brunda Garred & Brucker

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$ ) 0			

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
44	20** = 24	18	\$432.00
Independent Claims	4	3** = 1	\$86.00
Multiple Dependent			\$518.00

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ ) 518.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	\$420.00
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	\$180.00
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ ) 600.00

## SUBMITTED BY

(Complete if applicable)

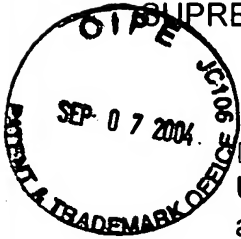
Name (Print/Type) Eric L. Tanezaki Registration No. 40,196 Telephone 949-855-1246  
Signature Eric L. Tanezaki Date 09/01/2004

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ATTORNEY DOCKET NO.: WSTD L-049A / K35A1030  
TITLE: DISK DRIVE HAVING DISK DRIVE HOUSING INCLUDING AIRFLOW  
SUPPRESSOR PORTION



**Certificate of Mailing under 37 CFR 1.8 or 37 CFR 1.10**

☐ I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:


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on September 1, 2004

  
(Signature)

Kimberly Carlsen

(Typed name of person signing certificate)

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1. Certificate of Mailing;
2. Transmittal Form;
3. Fee Transmittal (in duplicate);
4. Petition for Extension of Time Under 37 C.F.R. 1.136(a);
5. Amendment (15 Pages);
6. Declaration of Inventor, Raffi Codilian (3 pages including Exhibit A);
7. Information Disclosure Statement Pursuant to 37 C.F.R. Section 1.97;
8. Form PTO/SB/08a (in duplicate);
9. Check in the amount of \$180.00 (for IDS filing fee);
10. Check in the amount of \$938.00 (for additional claims fee and extension of time fee); and
11. Two (2) Return Postcards.

Attorney Docket: WSTD L-049A / K35A1030

Application No.: 10/062,955

Response to Office Action of 04/26/2004



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	Raffi Codilian	)	Confirmation No.	4573
		)		
Serial No.:	10/062,955	)	Art Unit:	2652
		)		
Filed:	01/31/2002	)	Examiner:	Julie Anne Watko
		)		
For:	DISK DRIVE HAVING	)		
	DISK DRIVE HOUSING	)		
	INCLUDING AIRFLOW	)		
	SUPPRESSOR PORTION	)		

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AMENDMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of April 26, 2004, please amend the above-identified application as follows:

09/08/2004 EAREGAY1 00000018 10062955

03 FC:1201	86.00 NP
04 FC:1202	432.00 NP